

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER BUILDING INDUSTRY ASSOCIATION OF SOUTHERN CALIFORNIA PAC			Date of This Filing 11/02/2022	Date Stamp Page 1 of 4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 741733		Report No. 11022022		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY IRVINE	STATE CA	ZIP CODE 92623	No. of Pages 4		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other

PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment:

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER BUILDING INDUSTRY ASSOCIATION OF SOUTHERN CALIFORNIA PAC			Date of This Filing <u>11/02/2022</u>	Date Stamp Page 2 of 4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 741733		Report No. <u>11022022</u>		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY IRVINE	STATE CA	ZIP CODE 92623	No. of Pages <u>4</u>		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
11/01/2022	ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022 LOS ANGELES, CA 90071 ID# 1445830	BOB HERTZBERG (IE COMMITTEE) County Supervisor Jurisdiction: Other LOS ANGELES COUNTY, #3	\$25,000.00	11/08/2022
11/01/2022	BILL COOPER FOR WATER BOARD 2022 VALENCIA, CA 91355 ID# 960877	BILL COOPER DIRECTOR Jurisdiction: Other SANTA CLARITA VALLEY WATER AGENCY, #1	\$1,500.00	11/08/2022
11/01/2022	DIRK MARKS FOR WATER BOARD 2022 VALENCIA, CA 91354 ID# 1452086	DIRK MARKS DIRECTOR Jurisdiction: Other SANTA CLARITA VALLEY WATER AGENCY, #2	\$1,500.00	11/08/2022
11/01/2022	GUTZEIT FOR SANTA CLARITA VALLEY WATER AGENCY 2022 NEWHALL, CA 91321 ID# 1425379	MARIA GUTZEIT DIRECTOR Jurisdiction: Other SANTA CLARITA VALLEY WATER AGENCY, #3	\$1,500.00	11/08/2022

Reason for Amendment:

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER BUILDING INDUSTRY ASSOCIATION OF SOUTHERN CALIFORNIA PAC			Date of This Filing <u>11/02/2022</u>	Date Stamp Page 3 of 4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 741733		Report No. <u>11022022</u>		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY IRVINE	STATE CA	ZIP CODE 92623	No. of Pages <u>4</u>		

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/10/2022	ROB BONTA FOR CA ATTORNEY GENERAL 2022 SACRAMENTO, CA 95815 ID# 1437201 Memo Reference: F497P2.PDT34	ROB BONTA Attorney General Jurisdiction: Statewide	\$2,034.31	11/08/2022

Reason for Amendment:

Memo Reference: F497P2.PDT34
IN-KIND: FUNDRAISING EVENT